

## BT/CT Standing Minutes: July 14, 2006

### AGENDA:

1. CT Update
  2. Hospital LRN Level A Laboratory
  3. LRN Web-Based Seminar
  4. July 1<sup>st</sup> Danvers WalMart Incident
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Welcome to Jeanette Goyette, the new Center for Environmental Health (CEH) liaison.

#### 1. **CT Update:** (Dr. J. Jenner, J. Nassif)

On July 3<sup>rd</sup> and 4<sup>th</sup>, Paul Servizio and Dr. Jenner participated in the Civil Support Team (CST) mission at the Boston Charles River Esplanade.

#### Background information on instrumentation

*Liquid chromatograph/mass spectrometer/mass spectrometer (LC/MS/MS)* is used for structural identification of compounds. LC/MS/MS is particularly useful for analyzing substances with high molecular weights, and chemical warfare agent metabolites.

*Inductively Coupled Plasma –Mass Spectrometer (ICP-MS)* is used to detect and quantify heavy metals in urine.

#### Upcoming Trainings

The LC Resources, Amity OR vendor will provide the second part of the intensive three-part training for the LC/MS/MS. The course will be held at SLI on July 24<sup>th</sup> through July 27<sup>th</sup>. In addition to the SLI Chemical Terrorism Laboratory staff, two chemists each from the Maine and New Hampshire LRN-C labs will be in attendance.

The final training of the LC/MS/MS three-part training will be held at the CDC. This analyte specific course will enable SLI to test for nerve agent metabolites in urine samples.

John Gillis has been selected to attend the Food Emergency Response Network (FERN) ICP-MS training course, which will be held in Ohio on August 7-10<sup>th</sup>.

Julie Nassif and Cheryl Gauthier will be at the August 8-10<sup>th</sup> FBI food agroterrorism training in NY.

#### 2. **Hospital LRN Level A Lab Readiness Drill :** (L. Cavaleri)

Round 2 of the Year 2 hospital sentinel laboratory drill began July 13<sup>th</sup>. SLI sent overnight the participating laboratories three suspect samples. All 22 laboratories received the samples as of July 14<sup>th</sup> 2006. After working up the sample, the hospitals will send SLI the specimen(s) they could not rule for suspect BT agents.

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Upon receiving the samples from the hospitals, Cheryl Gauthier will spike them with real BT agents to test her BioThreat laboratory staff. The SLI BT laboratory staff will be tested on their ability to identify various BT agents as well as correctly initiating the notification process. Cheryl Gauthier, Mariah Grazioplene, Dr. Al DeMaria, Jr., and Rich Meyer will receive notifications.

A conference call will be held with the participating hospitals to review the after action analysis of this exercise. A webcast system called Interwise may be used for this call.

Action steps:

- ➔ Receive in-depth Interwise training from Scott Kenfield and practice internally with the SLI staff, prior to the official call.

### 3. **Laboratory Response Network (LRN) web-based seminar:** (Dr. S. Smole)

On Monday, July 10th there was a seminar to discuss the LRN Results Messenger V2.

#### Update on efforts to help labs enable LRN data messaging using their own systems

- LRN Results Messenger enables laboratories to securely exchange critical laboratory data in compliance with Public Health Information Network (PHIN) data standards.
- LRN messenger 2.0 will stand in place until a laboratory is PHIN-certified to exchange LRN-related data using its own Laboratory Information Management System (LIMS).
- SLI is unique because we are custom building a LIMS system. Many of the other LRN laboratories are purchasing commercially of the shelf (COTS) systems.

#### Update on LRN Results Messenger 2.0 deployment progress

CDC deployment began in March of 2006. Currently 39 out of the 50 state public health laboratories and 50 out of the 100 non-state laboratories have been deployed. LRN messenger 2.0 is expected to be available in October for LRN-Chemical laboratories.

Future versions of the LRN Results Messenger 2.0 will allow for bidirectional data exchange between an LRN lab and its partners. For example, SLI could generate an electronic order to request testing of a sample at another laboratory. Upon completion of testing that laboratory could send SLI the results electronically.

#### Overview of available documentation and training

Two documents were passed out and discussed during the meeting:

- “Policy Statement on Notification of Officials of Significant Laboratory Results.” *lrn.notification.policy.121605*: Dec. 16, 2005; pp. 1-2.
- “Policy Statement on Data Messaging of Testing Results for BT Agents by Members of the LRN to the CDC.” *lrn.messaging.policy.011006*: March 8, 2006. pp 1-4.

The *LRN notification policy* outlines the time frame officials should be called regarding high-confidence presumptive and/or confirmatory results. The *LRN messaging policy* outlines the time frame of submitting test result data to CDC through an electronic mechanism. It states that messaging should be done “for a potential public health incident defined as an emergency

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situation or any other testing of credible suspect material requiring use of LRN algorithms, assays, and reagents.” lrn.messaging.policy.011006.

### Other:

A reminder that digital certificate will soon be required to reach the secure LRN website.

The LRN Messenger 2.0 test application can be downloaded on any machine.

More clarification will be obtained on the LRN messenger director and tester roles, as well as on the lrn.messaging.policy.011006.

#### **4. July 1<sup>st</sup> Incident WalMart, Danvers MA: (M. Feeney, J. Nassif)**

Approximately 60 people were evacuated from the WalMart store in Danvers. Systems included nausea, dizziness, shortness of breath, burning eyes, and/or burning throat. A HazMat team came from Haverhill, MA and assisted with evacuation and decontamination of customers and employees. Representatives from the MDPH Center of Environmental Health, and Center for Emergency Preparedness were in contact with David Ladd, HazMat director during this time.

According to the Boston Globe, spokespeople at Beverly Hospital and North Shore Medical Center said evacuated individuals were treated at the following hospitals: North Shore Medical Center’ Salem facility, the Union Hospital in Lynn, the Beverly Hospital, the Addison Gilbert Hospital in Gloucester, and the Lahey Clinic Medical Center in Peabody.

Levenson M., Zheng Y. *Scores Evacuated as Fumes Close Store*. The Boston Globe. July 2<sup>nd</sup>, 2006.

[http://www.boston.com/news/local/articles/2006/07/02/scores\\_evacuated\\_as\\_fumes\\_close\\_store/](http://www.boston.com/news/local/articles/2006/07/02/scores_evacuated_as_fumes_close_store/)

Based on the after action discussion during the BT/CT meeting, it was agreed that the Chemical Terrorism Response Lab (CTRL) at SLI should be contacted for future incidences. The CTRL is an LRN-Chemical (LRN-C) Level-1 laboratory and can provide guidance to hospital personnel on blood and urine sample collection following an unknown chemical exposure. The CTRL personnel are trained in receiving, repackaging and shipping clinical specimens to the CDC Rapid Response and Analytical Testing (RRAT) laboratory. The CDC RRAT laboratory would have tested the clinical specimens for more than 150 chemical agents and/or their metabolites.

In an unknown chemical exposure event, analyzing clinical specimens may yield valuable information about the agent, especially when hand-held chemical screening devices yield negative results.